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ABSTRACT

This booklet is intended to assist midlevel health care managers in assessing and improving their health care management skills. The first chapter uses the story of one health care manager's recognition of his own weaknesses and subsequent self-improvement to illustrate the qualities and skills that make a good manager. The second chapter, which deals with the functions of a manager, covers deciding what to do and how to do it, delegating tasks and supervising, evaluating and monitoring program performance, and organizing continuing education for oneself and others. The third chapter helps managers analyze their present situation, set priorities, establish long- and short-term goals, prepare a plan of action, develop working procedures and policies, select staff, prepare a budget and reporting system, delegate tasks, develop an appropriate style of leadership, motivate and evaluate staff, evaluate program performance, take corrective action, keep up with new ideas through continuing education, set an example for and teach others, and involve staff in continuing education. The fourth chapter suggests ways of obtaining feedback from colleagues, supervisors, and users. The final chapter includes separate self-assessment instruments for evaluating skills in the areas of providing services, managing personnel, providing leadership, maintaining community relationships, and managing financial resources. (MN)

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SELF-ASSESSMENT FOR MANAGERS OF HEALTH CARE

How Can I be a Better Manager ?

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1. WHAT MAKES A GOOD MANAGER?

Mid-level managers of health care are often not well prepared for their job. How many of you have had preparation in administration, accounting or planning? By and large your professional training has been in medicine, nursing or a related science. Your management skills were usually "picked up" along the way.

This booklet is intended to help you look at yourself as a manager. In reviewing the functions of managers you will have a chance to assess your own performance in areas which are important to your work. The booklet is not a substitute for organization and management texts. It is, rather, a modest attempt to provide practical guidelines and stimulate self-assessment by managers at the front line of health care delivery.

During the preparation of this booklet, we had a chance to talk with many mid-level health care managers. The story of one individual, Dr S, is worth repeating here since his background is fairly typical. Dr S was eventually able to recognize some of the weaknesses in his managerial role and developed an enviable reputation as an excellent health manager.

> "I suppose I never really considered any field besides medicine. My high-school teachers used to say I had a natural talent for the sciences and my family encouraged me to consider medicine. Although I certainly wasn't a star pupil in medical school, I enjoyed caring for the patients and was lucky to be assigned to a busy health post in a town not far from home after graduation. I was transferred quite a bit, and for a short period worked as an assistant to the administrator at the central hospital. That was my first real exposure to management.
>
> "A few years later I was assigned to this district as a staff medical officer. I was delighted to be promoted later to the position of district health officer. By then, I'd become terribly frustrated by so many administrative obstacles that limited what I could do for the

community. I suppose my predecessor had done what he could but I was tired of the constant delays in getting essential drugs when I needed them. A decent microscope was always impossible to obtain no matter how many requisitions I prepared. Staff were often assigned or transferred without any apparent reason.

"I was very pleased that as district health officer I'd have a chance to improve things. The first thing I wanted my staff to know was that I was going to resolve those problems. During my first few weeks I visited nearly all the health posts in the district and talked with the staff about their problems. Each day my list kept growing and quick solutions were hard to find. The few problems I was able to solve seemed to take all my time, no matter how many extra hours I put in. What was worse, I soon found that what seemed to be an ideal solution in the health post only created more headaches at the district office. It seemed I was only putting out small fires and not doing much to really improve the health services.

"The best decision I made was to force myself to take a good, hard look at the list of problems. My second useful step was to look at how I was using the resources available to me, especially the amount of time I was spending on "putting out fires". Were we contributing to better health care? We were certainly very busy but what were we producing? Apparently I was keeping myself and my staff busy trying to solve problems but not preventing them. A lot of resources, including time, were being wasted.

"I made time to study what the health problems and service needs were in the community and took a fresh look at whether or not the health centres were really responding to those needs. In many cases they weren't. Many changes were needed, some services were costly to run and had little effect, the administrative office produced a lot of paperwork but did little to support the people in the health centres. The list of needed improvements was long, far too much for me to handle. I had to

learn to delegate these tasks to appropriate people. For the most part they proved quite capable and needed only occasional supervision, leaving me more time to respond to those issues that demanded my direct involvement.

"I made many difficult decisions at that time. Staff had to be reorganized, the distribution of supplies and equipment had to be changed, the entire budget was restructured. I was encouraged that by relying on competent staff, carefully managing my own time and helping them to manage theirs, some positive results were slowly appearing. Most importantly, I could see that what we were doing was, in fact, directly linked to the most important health problems in the community.

"I learned that it wasn't up to me to try to resolve all the problems but, as manager, I had to get tasks accomplished through others, and also, to decide on future policy and then organize the available resources of time, staff and material, to carry it out. We were finally working as a team, no longer just trying to put out fires but actively planning better ways to provide services to the community."

When Dr S was first promoted to become district health officer, he had made the common assumption that because he was a good physician he would automatically be a good manager. But the management role, which involves the ability to plan and organize, requires certain basic qualities and skills that must be learned and constantly improved upon. It is a constantly changing field where new concepts and strategies are being developed, tested, modified, and eventually applied. Traditional approaches to management have often been found to be less useful than once thought. The effective manager needs first to recognize his or her own strengths and weaknesses and then to accept that basic skills can be improved.

As a first step we suggest that you consider your own experiences and difficulties as a manager against the story told by Dr S. If you can identify with his situation you are likely to find useful suggestions in this booklet.

To provide a framework for self-assessment we have divided the overall job of managers into groups of functions. The following section briefly examines what these functions entail. We then provide you with a checklist that can help you decide which area you want to look at first. Once you choose an entry point you are invited to move to the corresponding section in the booklet. In each section you will find a breakdown of the function into its parts and suggestions for improving your performance. At the end of the booklet you will also find a number of questionnaires which you can use to obtain feedback from others. Bon voyage!

2. THE FUNCTIONS OF A MANAGER

In order to assess your abilities, it is helpful to group the complex functions for which you are responsible under several main headings:

DECIDING WHAT TO DO

The first section focuses on the activities undertaken to make a logical, informed decision on where your limited resources can do the most good. You may observe, for instance, that your staff are very busy, but you must ascertain that what they do relates to the real needs of the community.

The first step is to analyse the present situation to identify areas needing, and opportunities for, development. You should consider the kind of information you need and how to get it. Your next step is to determine priorities and to set clear goals for health services in both the long and the short term.

The functions grouped under this heading thus include:

- Analysing the present situation ..... page 10
- Setting priorities ..... page 13
- Establishing long- and short-term goals ..... page 16

DECIDING HOW TO DO IT

Once you know what it is you want to accomplish, your next task is to determine how to do it. This section will assess your ability as an organizer: how do you blend the various components required for quality health care into a smoothly operating delivery system? You will be invited to pay special attention to duplication of effort by different staff or operating units, and to activities which may interfere with each other. It is often the case that supporting units, for example, present obstacles to those who are providing services rather than support them.

This section reviews the steps you will have to take in preparing an overall strategy, how units are formed around different groups of tasks and the development of a budget that realistically distributes the available resources.

The functions grouped under this heading thus include:

- o Preparing a plan of action ..... page 18
- o Developing working procedures and policies ..... page 19
- o Selecting staff ..... page 21
- o Preparing a budget and reporting system ..... page 22

DELEGATING TASKS AND SUPERVISING

As in the case of Dr S, many managers find that they simply don't have enough time available for all the tasks they assign themselves. The feeling may be that a particular issue or problem is so urgent that only one's direct involvement will resolve it satisfactorily. But too often this means that time must then be taken from the manager's major responsibilities as a planner and organizer.

In this section, you will be invited to assess how well you are delegating tasks to appropriate staff. The key is to distinguish which tasks can be delegated, to whom they can be delegated, and then to provide the appropriate supervision.

How well your staff perform their assignments depends on your skills as a leader. Staff salaries are almost always a major expense in the health care budget. But no matter how much or how little is invested to attract qualified staff, their performance on the job is directly related to the manager's qualities as a leader and motivator of others. You will probably recognize your own "style" of personnel management among those discussed in this section. You will also be able to judge how flexible you are in adjusting your approach to the personalities and issues involved in a given situation.

The functions grouped under this heading thus include:

- Delegating tasks ..... page 26
- Developing an appropriate style of leadership ..... page 28
- Motivating staff ..... page 29
- Evaluating staff ..... page 32

EVALUATING AND MONITORING PROGRAMME PERFORMANCE

This is an area that often receives less attention from managers than it merits. Services are often provided over many years at high cost with little effort to assess their worth. Even when evaluation is given adequate priority, it is often poorly planned and conducted. It is not uncommon for evaluation efforts to produce piles of reports, charts and assorted documents that keep some people busy but have nothing to do with determining whether or not progress is being made towards your goals.

In this section assessment is divided into the various steps of the evaluation process: planning for evaluation, selecting indicators to measure progress, collecting information, comparing results with objectives and taking corrective action.

The functions grouped under this heading thus include:

- Planning for evaluation ..... page 35
- Selecting indicators to measure progress ..... page 36
- Collecting information ..... page 37
- Comparing results with objectives ..... page 38
- Taking corrective action ..... page 39

ORGANIZING CONTINUING EDUCATION FOR YOURSELF AND OTHERS

As mentioned earlier, basic management skills must be learned and constantly improved upon. Continuing education is part of the manager's task if he or she is to keep up to date with new approaches. The alternative is to risk becoming satisfied with your own image, and using an approach to

management that is stale and not challenging or rewarding. This section suggests sources of information that will keep you up to date and also a plan to assess your management skills on a regular basis.

Continuing education is equally important for your staff in their particular areas of responsibility. The manager's role here is to set an appropriate personal example and to ensure that staff have access to appropriate material and opportunities for their own career development.

The functions grouped under this heading thus include:

- Keeping up with new ideas ..... page 40
- Setting an example for others ..... page 41
- Teaching ..... page 42
- Involving staff in continuing education ..... page 42

We suggest that you review the functions listed above in order to determine which aspect of your performance you want to consider first. Because the manager's task is cyclical in nature you are likely to reach the same destination regardless of where you start. Hence, the best approach may be to start with the function about which you have more doubts, or in relation to which you experience more difficulties. Once you have identified the function you are most concerned about you should proceed to the relevant part of the next section of this book entitled "How do you manage work?".

3. HOW DO YOU MANAGE WORK?

DECIDING WHAT TO DO

Mr R, a conscientious health officer, had spent over 10 years operating a health centre in a large urban community. To his great disappointment, health conditions over the last three years had been deteriorating rather than improving. Worst of all, the support of the community of which Mr R and his staff were so proud had been dwindling. These disheartening developments took place at a time when Mr R and his staff felt they had been working harder than ever. What had gone wrong?

On advice from a senior colleague Mr R decided to review the situation. He talked to his staff and requested information on the work they did and difficulties they encountered. He talked to old residents and newcomers about their expectations and needs. The picture which emerged made Mr R very angry with himself for neglecting to review the situation in his community more often.

In essence, he discovered a gradual but significant change in the demographic make-up of his community. A steady immigration from the rural areas because of economic conditions had created substantial overcrowding in some areas. The incidence of malnutrition had increased as the newcomers were exposed to a new, costly and unfamiliar diet. The health activities offered in the past had failed to reach the newcomers and to respond to their needs.

As expected, Mr R felt frustrated. Like many managers he had limited control over problems associated with migration, housing, employment and other welfare issues. He did not even have control over health services issues such as the amount of resources allocated to various service areas. These were determined at higher levels. Yet, Mr R knew that the problems would not go away by putting the blame on others. The first task, clearly, was to determine the best way to use his limited resources.

Unfortunately there are times when a manager has to take decisions in a vacuum, that is, without a thorough understanding of the health conditions and the cultural and economic environments. The factors to be considered are

complex and the decisions are difficult. By identifying some of these factors and putting them in sequence, we offer you an approach to help you decide what needs to be done.

Analysing the present situation

In analysing the situation in which you operate you must take a broad perspective. It is easy to fall into the trap of perceiving only what you want to see and hear. The danger of "tunnel vision" is greatest when you do all your planning from behind a desk on the basis of limited information given by people who tend to agree with you. To understand the opportunities and constraints inherent in each situation you must look at it from different angles.

In order to evaluate both the health problems of the population and the resources that are currently available, do you:

o Gather statistical data to show predominant trends in morbidity and mortality from:

  - ministry of health,
  - national institute of statistics or similar organizations,
  - international agencies involved with health policy (WHO, UNICEF, The World Bank, private non-profit-making agencies, etc.),
  - schools of medicine and public health,
  - area data from hospital records, health centres and local government statistical and planning offices?

In considering the information provided by the various organizations you should check whether the data makes sense. In order to look for inconsistencies and take account of the nature of the organization, its probable biases and its reputation, do you:

o Review the national health plan to learn of priorities and trends? (Examining the relative funding levels of various projects and services over recent years will often provide as much information as the narrative portion.)

- o Gather information pertaining to health services that are currently provided or are being planned by the ministry of health, with particular concern for:

  - the number, types and locations of hospitals and health centres,
  - their stated purpose (e.g. their service area, types of services, population served, etc.),
  - their staffing pattern and material resources,
  - how the various services are expected to interact and support each other, both in theory and in practice?

- o Gather similar information concerning other bodies providing health services from:

  - local medical associations,
  - public health society,
  - nursing associations,
  - medical laboratories,
  - traditional healers and birth attendants,
  - religious groups?

- o Review data on health services provided by international organizations:

  - WHO, e.g., country profiles and country reports,
  - UNICEF, e.g., reports of projects to promote health of children,
  - The World Bank, e.g., study mission reports of socioeconomic development,
  - private, non-profit-making agencies (the foreign ministry often provides information on which groups are providing health services in your country),
  - embassies that provide international assistance in health services?

- o Visit the health service facilities to evaluate the services provided by interviewing staff (physicians, health workers, etc.) and users of the service and compare this information with the stated purposes of the facility?

- Discuss health and socioeconomic conditions with community organizations (especially women's groups), teachers, religious leaders and political figures?

A careful compilation and review of this information on health conditions and services may not provide all the information you need. It may be necessary to undertake a survey in your area. Before beginning, do you:

- Identify precisely the information you need and know how you will use the additional information gained? (Information about the current situation may be required for assessment of progress.)

- Seek assistance in designing a survey from experts, from the sociology faculty of the local university, for example?

- Decide who will be the best source of information? (Usually some combination of health professionals and the potential users of services is most appropriate.)

- State survey questions simply and directly and in such a way that the responses will provide the specific information sought?

- Select a sample of the population that will adequately represent all segments of the community, including people who have not previously used the available health services?

- Ensure that resources are available to tabulate and analyse the collected data?

- Field test any questionnaire and analyse the results before starting a large-scale survey, with the object of answering the following questions:

  - Is the method providing the information efficiently?
  - Are there alternative methods that would be quicker or less costly?
  - Do responses suggest that there are other issues to be raised, or that some of the questions are unnecessary?
  - How easily can the information be tabulated and analysed?

Based on this information, do you then:

- o Consider whether or not the services you are now providing are the most appropriate?
- o Prepare a list of alternative approaches to providing services?
- o Keep an open mind about new, innovative approaches?
- o List all possible alternatives before deciding which are feasible and which are not?

Setting priorities

Once the needs and resources are known and a comprehensive list of alternatives has been developed, some method of establishing priorities is needed. Unfortunately, it's not unusual to find high-cost, high-technology services being selected for the benefit of a small segment of the population while the common (and perhaps less "interesting") ailments go untreated. Clearly, the concept of seeking the most benefit for the largest number of people is not always pursued in determining priorities.

Rigid selection criteria cannot be set in a uniform manner. The importance given to any particular criterion must often be based on past experience. Bear in mind that preventing disease is preferable to treating disease; however, both prevention and treatment must be offered as a package in community health services. A specific project focused on measles prevention, for example, should be linked directly to services that also provide treatment.

When reviewing the information gathered, you may ask certain questions in order to help formulate priorities. Do you:

- o Determine the major health threats to the population?
- o Estimate the number of persons at risk, or the number suffering from the illness?

- o Break down the different health threats according to the population groups that are most seriously affected:

  - age and sex groups,
  - geographical location (how accessible are they?)
  - economic status?

- o Compare the seriousness of different diseases in terms of whether or not it is life-threatening, whether it is acute or chronic, and whether it produces only mild symptoms or is seriously incapacitating?

- o Consider how susceptible the various illnesses are to prevention and treatment efforts?

An important consideration in establishing priorities is the relative cost of the various alternatives. In estimating costs for the major alternatives, do you:

- o Estimate, in general terms, the staffing required and costs, including training requirements?

- o Consider the cost of materials, including the maintenance costs and the availability of replacement parts for necessary equipment?

- o Ensure that equipment to be used is not unnecessarily sophisticated? (Labour-saving equipment, for example, is not always appropriate when labour is in ample supply.)

- o Determine the availability and costs of transportation of staff and equipment and the cost of storage facilities?

- o Consider what resources can be shared with the existing services?

- o Include the cost of mounting an outreach campaign to encourage community interest and participation?

- o Allow for the additional costs of establishing a new administrative and operations unit for any services or project that cannot be incorporated into existing units?

- o Make a realistic estimate of the number of community volunteers that will be willing to assist in providing services?

- o Include selection, training, and administrative costs when planning to use volunteer staff? (Volunteers usually mean a high turnover of staff, especially when no social or monetary benefits are offered. A heavy emphasis on volunteer staff should usually be avoided in the initial stages.)

- o Continually keep in mind that there will be opportunity costs related to whatever services are given highest priority? (For example, $5000 devoted to a vaccination project automatically cancels out $5000 that might have been applied to another area, perhaps malaria control.)

All health services, no matter how well designed, will have little chance of success without the community attaching some priority to them. In setting your own priorities, do you take into account the interest of the community by:

- o Discussing the alternatives with community leaders, local organizations, church groups, and individuals representative of the different social groups in the community?

- o Studying the economic status of the community to determine people's ability to contribute to the cost of medicines, to change purchasing habits or farming practices to improve their diet, etc.?

- o Investigating the possible impact a project may have on traditional healers or midwives in order to evaluate any resistance that might offer? (Priority might well be given to any project that would allow their direct participation and the opportunity for additional training.)

- Understanding how the community responds to disease? (For example, an initial education campaign would be necessary in a community where childhood diarrhoea is seen as a normal part of growing up rather than a potentially life-threatening disease.)

All services must, to some degree, rely on other elements of the environment to be successful. Before making a final decision, do you compare how each alternative will "fit" into its environment by:

- Ensuring that the proposed services match the current trends within the national health plan?

- Discussing the alternatives with other service providers to evaluate their degree of support, particularly in terms of services that would become part of a referral system?

- Evaluating probable support from members of the private business community concerning those services that require their support? (For instance, will pharmacists increase their range of family planning methods or will storekeepers make refrigerator space available during a vaccination campaign?)

- Evaluating probable interest among political units, ensuring that they approve the priorities and will provide the necessary official support?

Establishing long- and short-term goals

When priorities have been set and you know the general areas to which you will direct your efforts, it is necessary to formulate specific goals and targets. Long-term goals state precisely what it is you expect to accomplish in a certain period of time, usually over several years. They might deal with broad services, such as providing maternal and child health services (prevention and treatment) for the 12 000 residents in a particular area, or with single projects, such as reducing the incidence of water-related diseases by 15% in three communities.

Long-term goals set the overall direction of the services and provide a framework for intermediate goals. These are the steps that will be necessary in reaching the final goal. In the case of reducing the incidence of water-related disease, for example, intermediate goals might include the construction of a potable water system and the development of an education campaign that links diarrhoeal disease and water supply.

In setting goals, do you:

- Prepare a concise statement of exactly what the project is expected to accomplish in a specific period of time? (For example, to reduce mortality associated with dehydration by 25% through the use of home-prepared oral rehydration therapy (ORT) in 12 communities over a two-year period.)

- Clearly identify who the project is going to benefit? (For example, children from birth to five years of age in particular communities.)

- Estimate accurately the number of beneficiaries, how they will benefit and when? (For example in the first year: 50% of the estimated 300 cases of dehydration will receive ORT at home; in the second year: 75% will receive ORT.)

- Produce a statement of goals that can be easily understood by all concerned with the project?

- Form the statement in such a way that it will be possible to evaluate the goal, i.e. so that progress can be measured?

Since the long-term goal will usually be set several years in the future, the use of the intermediate goals will allow you to organize the project's daily operations within a more manageable framework. If properly planned intermediate goals are especially valuable for evaluation purposes. During the project's first year or so, you will probably not be able to evaluate the final goal directly, but whether or not the project is reaching the intermediate goal is a good indicator of eventual success.

When establishing intermediate goals, do you:

- Identify all the steps that must be accomplished before reaching the final goal? (For example, in the first six months: recruitment and training of health workers; preparation of teaching aids; and making initial contact with community groups.)

- Ensure that reaching the intermediate goal will, in fact, lead towards the final goal? (For example, final success depends on the community recognizing the importance of ORT.)

- State the goals in such a way that they can be readily assessed, either directly or indirectly? (Forming goals that can be measured should not, however, produce goals that are easy rather than goals that are important to achieve and/or statements that are difficult to communicate.)

- Consider the interdependence of the goals, i.e., what side-effects one goal may produce that will help or hinder the attainment of other goals? (For example, women who have successfully used ORT may encourage other hard-to-reach groups to participate.)

DECIDING HOW TO DO IT

Having set the goals defining just where you wish to go, you must prepare a plan that specifies how to get there. This is the plan of action or strategy. There is always more than one way to reach a destination and the manager's task is to select the most feasible, efficient, and economical route. The plan of action should be centred on the intermediate goal.

Preparing a plan of action

When preparing the plan or strategy, do you:

- Confer with colleagues about successes and failures of similar strategies in other districts?

- Consider innovative or novel ideas that could be tested on a small scale in your project?

- Adapt successful efforts in another community or country to your situation (considering the social and economic factors?)

- Carefully consider all of the side-effects that the strategy produces, both desirable and undesirable, and how they might be controlled?

- Keep the plan flexible to allow for modifications as experience is gained and evaluations are analysed?

- Plan for future growth of the project in the same area, or to repeat the project in a new area?

- Ask other providers for their review and criticism, especially those with whom a direct or indirect relationship will be necessary?

- Attend regular meetings of community groups?

- Invite community representatives to staff meetings when appropriate?

- Make time for informal discussions with residents?

- Continue your dialogue with the community to encourage their continuing input? (This is most important.)

Developing working procedures and policies

From the project's overall plan, specific activities will now be identified. A chart of working procedures will allow the manager to group these activities into a logical pattern. The chart not only describes the way the project is set up for operations, but is also a helpful tool in visualizing how the units and sub-units are expected to interact. It also helps to clarify responsibilities and establish lines of authority and communication. As a staff training device, it will help staff to recognize their role in working towards the project's goals.

If you are developing a new project or service, you will have relative freedom in designing the chart of working procedures "from the ground up". Alternatively, it may be necessary to insert new responsibilities into an existing structure. Probably it will be a combination of these two possibilities.

In designing working procedures, do you:

- o Ensure that they encourage and facilitate two-way communication, vertically between supervisors and staff, as well as horizontally among the units?

- o Limit the number of staff that report to each supervisor in order to provide the supervisor with:

    - time to guide and monitor the activities of subordinates,
    - time to communicate with subordinates,
    - ease of coordination between key units? (A reasonable number of subordinates is six to eight, though this will vary according to the nature of the task and qualifications of staff.)

When using the chart of working procedures, do you:

- o Use it as a training resource when orienting new staff?

- o Ensure that each individual clearly understands how his or her activities are to be coordinated with those of others to achieve the project's goals?

- o Ensure that each individual knows how and when to communicate with others?

- o Modify the chart according to changes in the organizational structure or growth of the organization, and communicate these changes to the entire staff?

While the work chart helps to clarify what kinds of operational unit are needed and how they will interact, written policies will be needed to describe the functioning of the units. Do your written policies:

- o Specifically state the responsibilities of each unit and sub-unit?

- o Identify when and by whom decisions are to be made? (For example, when each committee meets, when budget proposals are approved.)

- o Identify who will make the decisions?

- o Specify the channels of communication between units and within units?

- o Define the authority of each unit?

Selecting staff

An important factor in assessing your performance as a manager concerns your ability to match staff to individual assignments. During the recruitment and selection process, do you:

- o Prepare a job description that:
  - describes precisely the primary and secondary responsibilities,
  - establishes minimum as well as desirable levels of education and experience,
  - makes it clear to whom the person reports and the number and type of staff that report to the position,
  - identifies other staff and units with which the person will cooperate?

- o Make the vacancy known within the organization and encourage appropriate junior staff to apply?

- o Ensure a large pool of candidates through wide advertising?

- o Allow adequate time and a relaxed atmosphere to conduct interviews of the most qualified applicants and, whenever possible, have other senior staff interview the applicant and include their evaluations in making the final decision?

- Control the interview by determining in advance just what additional information you need from the applicant and plan the discussion accordingly?

In assessing how well you have selected existing staff, the following points should be considered.

- Do staff have the appropriate educational background and experience for the job, neither overqualified nor underqualified?

- Is there a high turnover of staff that may suggest that assignments have been inappropriate?

- Has allowance been made for staff to be temporarily assigned to other units for both relief purposes and career development?

- Is there excessive dependence on any one staff member whose resignation would seriously disrupts operations?

- Are there clear paths for promotion?

Preparing a budget and reporting system

When Dr A was assigned to take over management of the regional office of the health services, he made a careful review of the existing information system, including the budget and related financial reports. He was surprised to see that the administrative unit had been assigned the highest percentage of the total operating budget. The regional office had control of six small health posts, but in each one there was at least one clerk assigned to purely administrative functions, in addition to the large administrative staff in the regional office. On further study, he found that earlier budgets had been quite modest in terms of administrative costs, but that while the number of health posts had grown in small increments each year, the cost of the administrative unit had somehow grown by leaps and bounds. True, the staff were well qualified and a lot of information was being produced, but how valuable was the information and how necessary was it in terms of the objectives of this regional office?

On reflection it appeared that previous managers had placed an excessively high priority on the reporting system, perhaps under the delusion that more reports helped justify the existence of the office itself. In particular, they wanted to ensure that the data they passed up to the central office was complete and fully detailed, even if its value was questionable.

Rather than seeing the administrative unit as a means to an end (a supporting service to the office's goals) the expansion of the unit and its functions became ends in themselves. The new manager now had the very difficult task of reviewing all functions of the unit, suppressing those that were not really appropriate to the goals and redesigning or streamlining the other functions to ensure efficiency. Staff had to be retrained and, in some cases, dismissed; a major restructuration was necessary before full attention could again be paid to the overall operations of the regional office.

The first step in preparing a budget is to review the goals of each unit and to determine how they relate to the goals of the organization. A fairly new approach to budgeting referred to as "zero-based budgeting" requires that each unit must justify its entire funding each year, and includes the presentation of alternative means to reach the goals. This is a departure from the more traditional approach which assumes that each unit will require the same funding base as the previous year, plus increases for growth inflation, new responsibilities, etc. In the example above, a zero-based system would probably have allowed an earlier identification of the problem and checked the irrational growth of the administrative unit.

Having reviewed the goals of each unit, their functions, and how they interrelate with other units, it is possible to identify an appropriate staffing pattern and estimate the materials and equipment required. At this point it is important to collaborate with the senior staff of each unit to ensure not only that the funding level will be well estimated, but also that the staff will view the budget as partly a result of their own planning effort, rather than as a dictate from management. The degree of emphasis on this collaboration will obviously depend on the training and experience of the individual staff.

Once the total funding level is determined, it's not necessary to be overly detailed in the budget itself. For example, in order to estimate the cost of educational material, it is necessary to determine the current prices (plus an allowance for inflation, if needed) of each item that has been decided on. The line item in the budget, however, can simply state the total cost under the heading "educational materials".

When preparing budgets, do you:

- o Identify a clear and direct relationship between the functions of the unit and the goals of the organization?

- o Ask each unit manager to prepare a preliminary budget and then work with him to produce a final budget? (This can be a valuable opportunity for staff development.)

- o Consider alternative methods that might produce the same results at lower cost?

- o Review the types of equipment needed, the level of technology that is appropriate, and any special staff required?

- o Consider the full cost of each item, such as:

  - cost of recruiting replacement staff and training expenses to allow for regular staff turnover,
  - maintenance and replacement of equipment,
  - contingency funds for unexpected needs,
  - a fair estimate of the effects of inflation, including salary adjustments?

- o Avoid unnecessary detail and group expenses under manageable headings?

- o Establish clear guidelines for the expenditure of funds and specifically assign financial responsibility to unit managers?

Before implementing the budget, it will be necessary to prepare a reporting system that will allow a comparison between the predicted expenses in the budget and the actual expenses incurred. In each case where there is a discrepancy, an analysis is necessary to determine the reason and take appropriate action. For example, it may be found that the pharmacy services are spending much less than allowed. Investigation may show that the purchase of anti-tuberculosis drugs was much less expensive than predicted. This prediction was based on a successful outreach campaign to identify new cases for treatment. The problem appears that either some of the planning assumptions were incorrect (such as the estimate of the number of unreported cases in the community being too high) or that the outreach campaign needs to be overhauled. The point is that the financial reports, if efficiently designed and carefully reviewed, are a valuable tool, not only to control the use of funds but also as a method of monitoring the effectiveness of operations.

The number and format of the reporting documents and the frequency of their preparation will depend on local circumstances. Care must be taken that the information produced will actually help the staff to reach the goals (avoiding the situation in the first example where many unnecessary reports were being produced) and yet still not be too expensive to produce.

Does the financial reporting system:

- Provide only the amount and kinds of information that are useful for conducting and monitoring the programmes?
- Present the information in a logical pattern and at appropriate intervals to detect areas of concern?
- Avoid excessive detail?
- Provide a method by which staff are encouraged to search for the most cost-effective strategies as part of their day-to-day responsibilities?

When the reporting system identifies substantial differences between planned expenses and actual expenses, do you:

- Review the situation with staff members to analyse the cause before taking corrective action?

- Consider whether the problem may have been in the estimates made during the preparation stage, rather than inefficiency during the implementation?

- Refer again to unit goals and make adjustments based on their relevance to the overall goals of the organization?

DELEGATING TASKS AND SUPERVISING

Dr S, mentioned in Chapter 1, had learned the hard way that the manager's role is not merely to get the job done himself, but to ensure that it is done efficiently by others. This involves several different functions: delegation, leadership and motivation. How you perform in each area will depend somewhat on your own personality. This is particularly true as regards the leadership style you adopt. But there are basic functions that are appropriate to all managers and common skills that can be improved.

Delegating tasks

The time available to a manager to respond to all the issues brought to his or her attention never seems to be sufficient. Often, however, this is because the manager has failed in the primary responsibililty: to delegate tasks to others. The manager's staff is the most important single asset available, but staff, like money, will be wasted if not properly organized.

Your success as a manager is judged not only by how well you perform your own tasks, but also by how effective you are in organizing the work of others. This includes delegating authority. Final responsibility, however, remains in the hands of the manager and this means that some risks are involved. A good manager will not shy away from these risks but will be able to minimize them through careful delegation.

Delegation not only saves time for other duties but allows routine decisions to be taken quickly by field staff and avoids long delays in waiting for approval from higher authority.

To determine whether you are undertaking tasks that could appropriately be delegated, do you:

- Periodically list your daily activities to consider whether your direct involvement is required?
- Review responsibilities that seem to require your direct involvement and decide how your staff could support you?
- Analyse the tasks you intend to delegate to determine the minimum qualifications needed to perform them?

In considering to whom tasks should be delegated, do you:

- Appraise the abilities of staff currently available to you and match abilities to tasks?
- Ensure that current assignments are challenging enough and draw fully upon the individual's abilities?
- Give staff the opportunity, whenever possible, to assume more demanding tasks on a trial basis to better judge their potential?

When delegating, do you:

- Provide staff with the appropriate resources and authority to carry out the task efficiently?
- Describe carefully what is expected and explain the limits of authority?
- Ensure that other relevant staff are aware of the assignment and will respect the authority of the responsible individual?

- Avoid interfering with the person's performance unless required?

- Accept that some mistakes will be made and use them as a learning experience?

Developing an appropriate style of leadership

First, we should bear in mind that leaders are not necessarily "born" leaders. It is a skill that can be developed and improved. Perhaps the best single way to assess your own skill as a leader is to ask yourself "Do I make a difference?" Can you think of a case where your skills allowed you to select a particular course of action that proved more successful than otherwise might have been possible?

In assessing your ability to provide the necessary leadership that will ensure a well-coordinated team effort among project staff, do you:

- Provide a strong example or role model that will encourage staff to develop similar traits?

- Make decisions without unnecessary delay and readily accept responsibility for them?

- Interpret personnel policies consistently and without bias?

- Establish standards of behaviour so that all staff know what is expected of them?

- Encourage frank discussions when conflicts arise and provide fair arbitration to resolve disputes?

- Ensure that each member of the staff understands clearly what is expected of him or her and the importance of what they do for the total operation?

An important aspect of leadership concerns the involvement of team members in making decisions. How do you decide who to involve, when and for what purpose? Do you consider:

- Who has expertise to contribute to the process of making particular decisions?
- Who may be affected by these decisions?

In general it is important to involve people who may be affected by the decisions and/or who can contribute to the process. The leader should also consider whether he or she needs to consult staff or is required to make the decision on his or her own. In making this choice do you:

- Consider whether you need advice from your staff concerning a particular issue?
- Consider whether the decision is truly open for staff influence or has already been made by yourself or others?

Effective leaders know that there is a time to ask for advice and a time to tell or instruct. The effective leader considers the particular situation and determines who can help and in what way. It is better to be honest and tell the staff when a particular decision has already been made than to create an illusion that their opinion is welcome. It is easy for staff to become cynical when democratic procedures are not genuine.

Motivating staff

Robert had worked for nearly three years in the laboratory of a large health centre. He had been trained directly by the senior laboratory technician, took his work quite seriously, and was a positive influence on new staff. Lately, however, the senior technician had received a surprising number of complaints from the physicians, all of which related directly to laboratory tests that Robert had done. In reviewing this situation, it was clear that the quality of his work had dropped seriously, such that the clinic director advised the senior technician to discharge Robert.

The senior technician realized, however, that he had an investment in Robert and that, normally, he was capable of reliable and efficient work. He arranged a meeting with Robert, during which he made it quite clear that the situation was becoming serious and could not be allowed to continue. At first, Robert was obstinate, not even defending himself. The senior technician continued to probe patiently until he got to the root of the problem.

Simply put, Robert had lost interest in his work. He felt less appreciated than he once did. What he personally considered to be consistently high quality work was no longer eliciting praise from his colleagues and senior staff. Explicit recognition was very important to him. But the staff had, over the years, become accustomed to Robert's reliability and now took it for granted. Robert felt he had lost their respect.

A rather lengthy conversation followed, during which the senior technician realized that Robert was ready for new challenges, his present duties having become too routine. He helped Robert to investigate which evening classes in basic sciences at the university might provide him with some of the skills that were a prerequisite to further advancement. He also arranged some minor restructuring of tasks within the laboratory that would give him the opportunity to assist senior staff in more complex work, and thus further develop Robert's practical skills.

In this example, the senior technician had correctly decided to use a rather humanistic approach to the problem. There would have been other alternatives, of course. He could have followed the clinic director's suggestion of threatening Robert with dismissal. He could also have told Robert that his work was unsatisfactory and then sat back until Robert decided to either change his attitude, resign or be dismissed. These are all examples of what some experts have described as democratic, autocratic, or laissez-faire styles. What we need to recognize is that one style will not be appropriate to all situations or to all people. For example, if Robert had been less concerned with his image and less oriented towards achievement, he might have responded quite well to the authoritarian approach in which he would simply have been threatened with dismissal if his work didn't improve.

Knowing what will motivate individual staff members in particular situations is a key to managing staff efficiently. Reflecting on your own position, it will be clear that it's not simply a salary that you are working for. In varying degrees, people are also interested in such issues as personal fulfilment, self-esteem, recognition, prestige, social contacts, and so on. Recognizing the interests and needs of your staff will allow you to provide an atmosphere in which people feel they are recognized as individuals and will reach a high level of job satisfaction. Staff who enjoy their work will almost certainly work as productive team members and will better accomplish the unit's objectives.

In motivating staff, do you:

- Consider your staff as individuals, attempt to understand their needs and concerns and respond appropriately?

- Ensure that each person understands and accepts his or her role in reaching objectives and sees them as their own objectives?

- Encourage open communication and ensure that staff feel they can approach you easily? (Bear in mind that the formal channels in the organization are designed for job-related communications and that informal channels must be actively developed to discuss anxieties, personality conflicts, etc.)

- Adapt your approach to personnel matters according to the situation as well as to the individual, using discipline, praise, guidance, etc., as appropriate?

- Recognize individual abilities and assist staff to realize their full potential?

- When considering changes in staffing patterns and assignments do you ask for the views of the individuals that will be affected? (Often, the employee has a better grasp of day-to-day operations and, if properly motivated, may be a key resource in making decisions.)

Evaluating staff

How well your staff are performing their individual assignments is one issue in deciding how well you are achieving the overall goals that have been set. This aspect, however, will be discussed on page 33 et seq. of this chapter. Here we are concerned with using personnel appraisals as a means of motivating staff. Regardless of the position one holds in an organization, getting feedback on performance is critical to job satisfaction. Regular personnel appraisals ensure an opportunity to discuss problems frankly and to guide the individual towards overcoming them. They are equally important as an opportunity to recognize special achievements.

In planning for personnel appraisals, do you:

- Ensure that each job description clearly describes the tasks the individual is expected to undertake?
- Explain to staff what measures will be used to evaluate their performance?
- Identify who will be responsible for the formal appraisal (usually the immediate supervisor) and who will review the results?
- Recognize that routine or informal appraisal is at least as important as the formal, yearly appraisal and take regular opportunities to discuss strengths and weaknesses with staff? (This is especially important for new staff or when new responsibilities are assigned.)

When preparing formal personnel appraisals, do you:

- See it primarily as an opportunity to open doors of communication and help each employee to achieve his or her potential?
- Prepare them on the due date and give them proper priority?
- Schedule them at least once a year?

- Ensure that unit supervisors understand their importance, guide them when necessary, and review the results?

- Allow sufficient, uninterrupted time to discuss personally both the positive and negative sides of the evaluation?

- Leave aside any personal prejudices and evaluate each individual fairly and honestly on job performance?

- Provide the opportunity for the employee to make a written comment on the evaluation, including this as part of the permanent record?

EVALUATING AND MONITORING PROGRAMME PERFORMANCE

In simple terms, evaluation is a process through which the manager obtains information to help him or her make better decisions. Although the need for evaluation seems obvious, it is often given a low priority by managers simply because they may feel that a particular problem in the operation of the programme or a personnel issue requires an immediate response and that the evaluation system is temporarily pushed aside. All too often, however, the result is that staff and funds continue to be invested in a strategy that is not efficiently accomplishing the set goals. Proper evaluation can identify possible solutions.

To be effective a carefully developed means of evaluating the programme must be an integral part of the initial planning process and then carried out consistently as a part of the routine operations.

Dr M had long been concerned about the high levels of infant and child mortality in the urban health centre where she was medical director. She knew that a large part of the problem was related to malnutrition and that this in turn was due largely to the fact that many young mothers were switching to the more popular use of bottle-feeding their babies rather than breast-feeding. Clearly, these women didn't understand the importance of breast-feeding and she decided to start a breast-feeding campaign as a logical solution.

Her goal was to improve the nutritional status of the 2200 children under two years of age in the centre's service area. Since the cause (bottle-feeding) and the effect (malnutrition) were so clearly linked, she saw no reason to spend time and money in regular evaluation. Under some pressure from the ministry of health, however, she did agree to specify in the long-range goal that the incidence of malnutrition would decrease by 15% at the end of two years. A baseline survey was done to determine the nutritional status at the start of the campaign.

The campaign began with much attention from the local news media and was an important topic of conversation during the initial months. Health workers were retrained through seminars and workshops on how to teach mothers the importance of breast-feeding and the proper techniques to be used. Classes were held once a week in the health centre and were very well attended. By the end of the second year, however, the budget was tight and there wasn't enough money available to increase the number of classes, which were growing in popularity. It was decided that the evaluation could be postponed and those funds devoted to increasing the number of classes. It was only after three years of operation that a survey was finally done, comparing the current incidence of malnutrition to the levels determined during the baseline survey.

The results were depressing. The incidence of malnutrition was largely the same as it had been three years earlier and in some of the poorer areas the situation was actually worse. What was happening here was that many mothers were attending classes simply because they had become a social gathering place that provided a break from the week's routine. They listened to the lectures but felt that the demands of their urban life-style simply made it too difficult always to have the younger children with them. Anyway, bottle-feeding was the "modern" way. As for the poorest women in the community, they rarely went to the health centre, except in an emergency.

Three years and a substantial amount of funds had been devoted to an unsuccessful strategy. The goal was appropriate but the means to achieve it were not. Some knowledge was being passed on during the classes but no changes were being made in child-feeding practices.

This situation could have been avoided if, right from the planning stage, an ongoing evaluation process had been included in the campaign strategy. If that had been done, the community health workers might have used their home visits to discuss and also monitor the feeding practices in each home. Recording the progress of each child and periodic weighing would have helped to identify children at highest risk. These families could then have been singled out for more frequent home visits and an attempt made to identify any special problems. Periodically collecting and analysing data about those women who had changed their feeding practices and those who hadn't would have helped keep the effort on the right track.

The campaign had been based on the erroneous assumption that once a woman was told that breast-feeding was best she would automatically adopt the practice. It was also assumed that women from all economic levels of the community would be attending the classes. Without regular evaluation, these faulty assumptions could not be tested.

Planning for evaluation

The development of a logical evaluation system rests on clearly expressing what it is that you expect to accomplish, and then measuring progress.

During the planning stage of a project, do you:

- Prepare a final goal statement that expresses precisely what the project is going to do in a given period, who will be affected, how, and when?

- Plan interim goals (steps to be accomplished in order to reach the final goal) that can be broken down into measurable tasks that identify who will do what, when, and at what cost?

- Plan for an evaluation system that:

    - provides information, at monthly or at least quarterly intervals,
    - identifies problems or areas of concern,

- provides feedback early enough to allow corrective action to be taken?

o Keep in mind that the evaluation system must be easily understood by the staff that are responsible for day-to-day operations of the project?

o Involve these staff members in the development of the evaluation programme?

o Identify how information will be gathered and analysed and provide safeguards to ensure that appropriate action is taken?

Selecting indicators to measure progress

Indicators will need to be developed to measure progress towards both the long- and short-term goals of the project. Whenever possible, they should measure progress directly. For example, in a measles reduction project an indicator might be the percentage of children in a certain population that have been immunized each month. This is a simple, direct, quantifiable way to measure progress. Other types of project might have to use indirect means. Education projects are typical. The retraining of traditional birth attendants as a step towards a reduction in infant mortality rates is a case in point. The strategy might include classes on the importance of hygiene in an effort to reduce the incidence of neonatal tetanus (an interim goal). Waiting for statistical information on the number of cases of tetanus might be appropriate but it will not be immediately available. An indirect measure might be to record the number of students continuing in the classes or, still better, a check on the practices of the students after completing the training course.

When selecting indicators to measure progress towards goals, do you:

o Select indicators that are relevant to the objective? Will accomplishment of the task being monitored bring the project closer to its goals? (For example, providing materials to establish home gardens is not likely to improve nutritional status if the crop is sold for cash.)

- o Select indicators that can be measured or well described?

- o Prepare a measuring tool that will be as objective as possible?

- o Design indicators that will directly measure progress towards goals, whenever possible? (In changing the practices of birth attendants, the fact that 30 attendants participated in a class on hygiene does not, by itself, ensure that practices have changed. Observing their routine work is a better and more direct indicator of changed practices.)

- o Design indicators that will not only identify problem areas but will also aid in identifying solutions? (If you are monitoring breast-feeding, for example, do you measure not only the change in absolute numbers of women breast-feeding, but also look for information about the type of woman who is not breast-feeding in order to help in developing alternative plans for reaching this group?)

- o Ensure that reliable baseline information is available against which progress can be measured after the project begins? (In some cases, this information will be partly available from your own research into the health needs of the community.)

- o Collaborate with project staff in establishing minimum standards of success? (This encourages team work and an appropriate reaction when there are shortfalls.)

Collecting information

During the planning stage, it must be decided: what information is to be collected, when it is to be collected, how it will be reported, and who is to be responsible for the system. In planning the collection of information, do you:

- o Ensure that the information will be reliable?

- Will the staff who collect the information be adequately trained?
- Will standardized forms and guidelines be used to ensure that each person collects the same information in the same manner?
- Will the system allow for supervisory staff to make periodical spot checks on the collection of information?
- When interviewing service recipients, will allowances be made for language differences and levels of literacy?

o In using sampling techniques, do you ensure that all members of the target group will be adequately represented, including all geographical areas, and all social and economic sub-groups?

o Collect information sufficiently often to ensure that problems will be identified early enough to take remedial action?

o Examine the existing information system of the local health offices, statistical institutes, and other local agencies to determine what information is already available to avoid duplication?

o Collaborate with other agencies or service providers to see what possibilities exist to share staff and facilities?

o Consider alternative ways to gather information that would be less costly, especially in terms of staff time?

o Consider in advance who will use the information?

- Who will be able to use this information?
- What type of adjustments might it lead to?
- Whether the information gained will be fed back into project operations?

Comparing results with objectives

Once the information has been gathered, and when you are comparing it with the objectives that were set during the planning stage, do you:

- Present the information in such a way that comparisons can readily be made with baseline data?

- Determine what additional information might be necessary to analyse fully any shortfalls, and, if necessary, know how and where to get needed information?

- Work with appropriate staff to determine the causes of shortfalls and possible solutions?

- Review the results with your staff? (A poor evaluation can be an important learning tool and a positive evaluation can be a chance to reinforce good work habits.)

- Review the indicators and the information gathering system to ensure that they are functioning efficiently and are the most appropriate methods, in view of experience gained in the operational stage?

- Modify the system when experience shows that the indicators are not the most appropriate measuring devices? (This may include indicators that are consistently met and now need only occasional spot-checking.)

Taking corrective action

No matter how well planned the evaluation system, its value rests with the manager's ability to use the information gained to keep the operational unit on the right track. After reviewing the results, do you:

- Decide which shortfalls will require immediate corrective action and which may only require closer monitoring before taking specific action?

- When time is available, ask your staff for suggested remedies?

- Review current literature and discuss the problem and possible solutions with colleagues, other providers and senior health officials (similar to the steps taken in the initial planning process)?

o Prepare a list of alternative solutions and consider how each alternative will have an impact on:

  - staffing patterns,
  - other units of the organization,
  - budget,
  - material resources?

o Set standards for corrective action including a time-frame for reports (that will evaluate the corrective action) and assignment of specific tasks and responsibilities?

ORGANIZING CONTINUING EDUCATION FOR YOURSELF AND OTHERS

Regardless of the type of services you are providing, there are resources available to both you and your staff that will help you to keep up with new ideas in managing and delivering those services. This section will review how well you are using them.

Keeping up with new ideas

In the introductory chapter, we emphasized that management is a changing, dynamic field. The checklists that we have presented are intended to evaluate your own skills and to help determine whether or not you are putting currently accepted principles of management into practice. But, as with any good evaluation system, it needs to be a part of your regular routine. Keeping abreast of developments in health care management and reviewing new methods of delivering health services is a good way of determining how well you are fulfilling your role as a manager.

To keep up with new ideas, do you:

o Keep an active and up-to-date list of readily available sources of information, such as journals, periodicals, programme reports, and textbooks?

- o Periodically select the most appropriate material from these sources and plan the necessary time to review them?

- o Know where to go for additional reference materials using both public and private sources?

- o Make a point to meet with professionals who are recognized in the management field, such as:

    - consultants with international organizations, e.g., United Nations agencies and voluntary organizations,
    - faculty members of public and private universities,
    - leaders in the business community?

- o Attend seminars and workshops offered by local and international groups?

- o Familiarize yourself with agencies or embassies that occasionally provide sponsorship for attendance at international symposia, courses and conferences?

- o Review management courses available at local universities that can help you broaden your qualifications in specific areas, such as financial management, logistics, communications, etc?

Setting an example for others

By taking advantage of self-education opportunities, you will be setting an example for your staff to follow. In planning for continuing education, do you:

- o Recognize that there are gaps in your own knowledge?

- o Set targets for your professional development?

- o Take advantage of continuing education opportunities and encourage others to do so?

o Believe that you can always improve?

Teaching

By teaching others we often learn ourselves. You should keep alert for opportunities to help junior staff within and outside your organization. Preparing a presentation for a workshop in an area in which you are particularly well qualified can be a challenging assignment. Appropriate student groups might be medical or nursing students fulfilling practical assignments in your unit or junior clerks who show potential. Subjects might include the particular group's role in, for example, budgeting and financial activities, the maximum use of material resources, or the evaluation process.

When assessing training needs, do you:

o Review which groups in your organization might benefit from increased training that you might be able to provide?

o Discuss training needs with staff?

o Make yourself available to staff and take advantage of opportunities to develop your own skill as a teacher?

o Encourage training institutions to use your centre as a place for practical training and involve yourself and staff in their learning activities?

Involving staff in continuing education

When considering the involvement of your staff in continuing education, do you:

o Make regular announcements of what educational resources are available for all groups of professional and support staff?

- Invite specialists from a variety of fields to present courses and workshops at the health centre?

- Include training costs in your budget, in order to allow time off work and to cover a portion of the expenses?

- Encourage staff to take on more complex tasks and provide on-the-job training?

- Provide opportunities for promotion by recruiting from within the organization whenever possible?

4. FINDING OUT FROM OTHERS

Up to now, we have been discussing ways that you can assess how well you function as a manager. We tend, however, to rationalize our own shortcomings no matter how fair and objective we try to be. This chapter will suggest ways that information might be obtained from others with whom you work and also from the users of health services. The feedback gained will be especially valuable in deciding which areas you need to improve.

Feedback from colleagues

One of the best sources of information is other professionals who are managing services in an environment similar to your own. Ideally, you might select an appropriate colleague whom you can work with on an exchange basis, evaluating each other's abilities. This will provide an unbiased view and is also likely to produce some fresh ideas.

Selecting the right person is critical. A few basic guidelines are:

- Look for someone who is recognized as a good manager and whose judgement you respect. It should be someone you feel you can learn from.

- Consider involving more than one person, for example, selecting one who is skilled in financial management issues and another colleague with a strong ability in another area, such as programme evaluation.

- Before beginning the process, explain frankly the general areas in which you feel you may be weak.

- Agree to present the findings in written form and be willing to accept constructive criticism.

- Limit the topics to those over which you have a fairly broad degree of control.

Feedback from supervisors

If a regular personnel evaluation system is in place, you will already be able to obtain feedback from your supervisors. If this is not the case or if it is not given proper attention, you'll have to take a more active role. Generally, you should find a helpful response from senior staff when you show concern and seek advice on your own performance.

It will help to present your concerns as clearly and specifically as possible. You may want to discuss a particular area which consistently gives problems. At the same time, present your own ideas on how you might improve your skills in a particular area in order to increase your effectiveness. Another approach could be to use one or more of the evaluation instruments presented here to begin a structured dialogue with senior staff.

Feedback from users

Seeking information from users of health services may not provide any direct assessment of your managerial abilities, but it will tell you whether or not the outcome has been successful. When services are criticized, you must then determine what has been your personal influence on these services and what personal improvements it may be necessary to focus on.

In this case, as with colleagues, be sure to select someone whose judgement you can trust and whose role in the community suggests that they will be able to analyse the services in more than a superficial manner.

5. INSTRUMENTS TO OBTAIN FEEDBACK

In order to help you obtain feedback from other health professionals, and from the community, this chapter presents several instruments that will structure the task of collecting information. In some cases they can be used in their present form. They can also be used as a starting point to develop your own questionnaires that focus on areas you feel to be of special concern.

Be sure to concentrate on areas that have been identified as weaknesses. You may want to select only certain items from the different lists that are appropriate to your situation and develop a single instrument to start with. Each instrument that you use should, whenever possible, be completed by several people. This is especially true in the case of staff and community representatives. When analysing the results, summarize the responses to each question and concentrate on areas where there is clear agreement among the different evaluators.

When you are asking other health professionals to evaluate your services, be ready to reverse the situation. Using these instruments yourself to evaluate another manager's performance will help you to understand how people respond to the questions and help you to analyse your own results. The process of evaluating other services will provide an ideal opportunity for both of you to develop fresh ideas and strategies. When problem areas are raised by the evaluators, encourage them to suggest possible solutions. They now have a rough idea of the issues and can provide an objective viewpoint that should prove valuable.

Some of the sample survey instruments, such as the one on Personnel Management (No. 2), are designed to be completed by specific groups, for example, your staff. Others, such as those on Community Relations (No. 4) or Providing Services (No. 1), might be appropriate for colleagues or community representatives. But don't hesitate to seek information from a variety of sources in each area. Junior staff, for example, might provide interesting comments on how well you handle community relations.

INSTRUMENT NO. 1 - PROVIDING SERVICES

Please circle a rating from 1 to 5 in response to the first series of statements - 1 if you strongly agree with the statement, 2 if you generally agree, and so on up to 5 if you strongly disagree.

In the comments section, please provide information you feel will be helpful, especially regarding those statements you either strongly agree or disagree with. Thoughtful and frank comments will be very welcome.

		Strongly agree				Strongly disagree
1.	The services provided are focused on the major health problems as seen by the community	1	2	3	4	5
2.	Services are in line with the national health plan	1	2	3	4	5
3.	The manager understands the needs and priorities of the community	1	2	3	4	5
4.	Community members are involved in the planning process	1	2	3	4	5
5.	Services have been designed as an integral unit in the referral system	1	2	3	4	5
6.	There is an appropriate emphasis on prevention as well as treatment of illness	1	2	3	4	5
7.	Services are designed to reach all social and economic groups	1	2	3	4	5
8.	The technology used is appropriate to the level of services	1	2	3	4	5
9.	Equipment is well used and is out of order for a minimum of time	1	2	3	4	5
10.	The number of staff is adequate	1	2	3	4	5
11.	The qualifications of staff are appropriate	1	2	3	4	5
12.	Evaluation is made a part of routine operations	1	2	3	4	5
13.	When problems are identified, a clear plan for corrective action is followed	1	2	3	4	5

Comments: (Please begin by showing the number of the statement concerned)

_____

_____

Questions:

1. What are the health needs that you are aware of in the community that have not been adequately met by the health centre?

_____

_____

2. What new services or programmes can you identify that show that the health centre is keeping up with the needs of the community?

_____

_____

3. Can you cite an example to show that the management is creative in developing new services?

_____

_____

INSTRUMENT NO. 2 - PERSONNEL MANAGEMENT

Please circle a rating from 1 to 5 in response to the first series of statements - 1 if you strongly agree with the statement, 2 if you generally agree, and so on up to 5 if you strongly disagree.

In the comments section, please provide information you feel will be helpful, especially regarding those statements you either strongly agree or disagree with. Thoughtful and frank comments will be very welcome.

		Strongly agree				Strongly disagree
1.	I have a clear job description that describes my routine duties in detail	1	2	3	4	5
2.	My education and experience are appropriate to my duties	1	2	3	4	5
3.	I understand clearly the kind of decisions I can make on my own	1	2	3	4	5
4.	When I need approval, I don't have to wait long before decisions are made	1	2	3	4	5
5.	I feel comfortable about discussing problems with my supervisors	1	2	3	4	5
6.	My supervisors are capable and qualified	1	2	3	4	5
7.	Supervisors usually discuss new plans with me before changes are made	1	2	3	4	5
8.	There are resources available to improve my effectiveness	1	2	3	4	5
9.	I have opportunities available for promotion	1	2	3	4	5
10.	There are sufficient materials available to perform each task	1	2	3	4	5
11.	There is usually enough time available to perform each task	1	2	3	4	5
12.	I have the right equipment available	1	2	3	4	5
13.	When equipment breaks down, it is usually repaired without a long delay	1	2	3	4	5

Comments: (Please begin by showing the number of the statement concerned)

_____

_____

Questions:

1. What do you feel is the role or purpose of the health centre?

_____

_____

2. What is the purpose of your particular department?

_____

_____

3. What changes would you make to make better use of the staff and equipment already available?

_____

_____

4. Are there other tasks you feel qualified for but have not had a chance to pursue?

_____

_____

5. Do you feel that your last personnel evaluation was helpful to you?

_____

_____

6. Why would you, or would you not, encourage a friend to apply for a position in the health centre?

_____

_____

INSTRUMENT NO. 3 - LEADERSHIP SKILLS

Please circle a rating from 1 to 5 in response to the first series of statements - 1 if you strongly agree with the statement, 2 if you generally agree, and so on up to 5 if you strongly disagree.

In the comments section, please provide information you feel will be helpful, especially regarding those statements you either strongly agree or disagree with. Thoughtful and frank comments will be very welcome.

		Strongly agree				Strongly disagree
1.	The manager enjoys the respect of his staff	1	2	3	4	5
2.	He sets a good example for junior staff to follow	1	2	3	4	5
3.	He understands the needs of staff and treats them as individuals	1	2	3	4	5
4.	He handles personnel matters fairly and consistently	1	2	3	4	5
5.	He acknowledges jobs well done and provides rewards without letting personal bias interfere	1	2	3	4	5
6.	He disciplines staff when necessary without letting personal bias interfere	1	2	3	4	5
7.	He shows his concern for the professional advancement of staff	1	2	3	4	5

Comments: (Please begin by showing the number of the statement concerned)

_____

_____

Questions:

1. What example can you point to that shows that the manager knows how to use both rewards and discipline in managing personnel?

_____

_____

2. How do you feel junior staff would rate the manager as a leader?

_____

_____

3. What specific leadership skills need improvement?

_____

_____

INSTRUMENT NO. 4 - COMMUNITY RELATIONS

Please circle a rating from 1 to 5 in response to the first serie of statements - 1 if you strongly agree with the statement, 2 if you generally agree, and so on up to 5 if you strongly disagree.

In the comments section, please provide information you feel will be helpful, especially regarding those statements you either strongly agree or disagree with. Thoughtful and frank comments will be very welcome.

		Strongly agree				Strongly disagree
1.	There is regular communication between the centre staff and the community	1	2	3	4	5
2.	The services provided are in line with the needs of the community	1	2	3	4	5
3.	Community members are aware of the services offered	1	2	3	4	5
4.	The centre makes good use of volunteer staff available in the community	1	2	3	4	5
5.	There are special services available for specific groups such as malnourished children, young mothers, tuberculosis patients, etc.	1	2	3	4	5
6.	Appropriate educational services are provided and used	1	2	3	4	5
7.	The staff are able to guide patients to other facilities when special care is needed	1	2	3	4	5
8.	The staff works with other providers in the community (traditional healers, birth attendants, etc.)	1	2	3	4	5
9.	Home visits are made for families at high risk or with special needs	1	2	3	4	5
10.	Regular discussions show that the staff has a good understanding of the needs of the community	1	2	3	4	5

Comments: (Please begin by showing the number of the statement concerned)

_____

_____

Questions:

1. What access do different groups in the community have to discuss their needs with the health staff?

_____

_____

2. Which groups in the community find it difficult to make full use of the services available?

_____

_____

3. Are some of the services provided using resources that could be more effectively used on more serious problems?

_____

_____

4. What recent services have been started that show that the staff really understand the needs of the community?

_____

_____

INSTRUMENT NO. 5 - MANAGING FINANCIAL RESOURCES

Please circle a rating from 1 to 5 in response to the first series of statements - 1 if you strongly agree with the statement, 2 if you generally agree, and so on up to 5 if you strongly disagree.

In the comments section, please provide information you feel will be helpful, especially regarding those statements you either strongly agree or disagree with. Thoughtful and frank comments will be very welcome.

		Strongly agree				Strongly disagree
1.	Personnel and materials are used wisely	1	2	3	4	5
2.	Money needed to maintain equipment and purchase parts is generally available	1	2	3	4	5
3.	The equipment purchased is not too sophisticated or expensive	1	2	3	4	5
4.	A reasonable amount of the budget is devoted to administrative expenses	1	2	3	4	5
5.	Vehicles and equipment are efficiently shared among different units	1	2	3	4	5
6.	The actual expenditures are reasonably close to the levels predicted in the budget	1	2	3	4	5
7.	Funds are available to respond to unforeseen situations and emergencies	1	2	3	4	5
8.	Minor adjustments can be made when needed without lengthy delays	1	2	3	4	5
9.	The reporting system is simple and not too time-consuming	1	2	3	4	5
10.	The reports provide only usable and necessary information	1	2	3	4	5

Comments: (Please begin by showing the number of the statement concerned)

Questions:

1. Can you describe areas where financial resources are not being efficiently used?

_____

_____

2. What suggestions can you make to improve the efficiency?

_____

_____

3. What safeguards are there to avoid misuse of funds?

_____

_____

4. How might the reporting system be simplified and still provide information needed by management?

_____

_____

= = =

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